

California Board of Registered Nursing

2011-2012 Annual School Report

Data Summary and Historical Trend Analysis

A Presentation of Pre-Licensure Nursing Education Programs in California

Southern Border

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INTRODUCTION

Each year, the California Board of Registered Nursing (BRN) requires all pre-licensure registered nursing programs in California to complete a survey detailing statistics of their programs, students and faculty. The survey collects data from August 1 through July 31. Information gathered from these surveys is compiled into a database and used to analyze trends in nursing education.

The BRN commissioned the University of California, San Francisco (UCSF) to conduct a historical analysis of data collected from the 2001-2002 through the 2011-2012 survey. In this report, we present ten years of historical data from the BRN Annual School Survey. Data analyses were conducted statewide and for nine economic regions¹ in California, with a separate report for each region. All reports are available on the BRN website (<http://www.rn.ca.gov/>).

This report presents data from the Southern Border, which includes San Diego and Imperial counties. All data are presented in aggregate form and describe overall trends in the areas and over the times specified and, therefore, may not be applicable to individual nursing education programs. Additional data from the past ten years of the BRN Annual School Survey are available in an interactive database on the BRN website.

Beginning with the 2011-2012 Annual School Survey, certain questions were revised to allow schools to report data separately for satellite campuses located in regions different from their home campus. This change was made to more accurately report student and faculty data by region, but it has the result that data which were previously reported in one region are now being reported in a different region. This is important because changes in regional totals that appear to signal either an increase or a decrease may in fact be the result of a program reporting satellite campus data in a different region. Data tables impacted by this change will be footnoted. In these instances, comparing 2011-2012 data to the previous year is not recommended. When regional totals include satellite campus data from a program whose home campus is located in a different region, it will be listed in Appendix A.

¹ The nine regions include: (1) Northern California, (2) Northern Sacramento Valley, (3) Greater Sacramento, (4) Bay Area, (5) San Joaquin Valley, (7) Central Coast, (8) Los Angeles Area (Los Angeles and Ventura counties), (9) Inland Empire (Orange, Riverside, and San Bernardino counties), and (10) Southern Border Region. Counties within each region are detailed in the corresponding regional report. The Central Sierra (Region 6) does not have any nursing education programs and was, therefore, not included in the analyses.

DATA SUMMARY AND HISTORICAL TREND ANALYSIS²

This analysis presents pre-licensure program data from the 2011-2012 BRN School Survey in comparison with data from previous years of the survey. Data items addressed include the number of nursing programs, enrollments, completions, retention rates, NCLEX pass rates, new graduate employment, student and faculty census data, the use of clinical simulation, availability of clinical space, and student clinical practice restrictions.

Trends in Pre-Licensure Nursing Programs

Number of Nursing Programs

In 2011-2012, the Southern Border region had a total of 13 pre-licensure nursing programs. The distribution of programs, by program type, has been consistent for the past four years: 7 ADN programs, 4 BSN programs, and 2 ELM programs. The majority (61.5%) of pre-licensure nursing programs in the region are public.

Number of Nursing Programs

	<i>Academic Year</i>									
	<i>2002-2003</i>	<i>2003-2004</i>	<i>2004-2005</i>	<i>2005-2006</i>	<i>2006-2007</i>	<i>2007-2008</i>	<i>2008-2009</i>	<i>2009-2010</i>	<i>2010-2011</i>	<i>2011-2012</i>
Total Nursing Programs	9	9	12	12	13	13	13	13	13	13
ADN Programs	6	6	7	7	8	8	7	7	7	7
BSN Programs	2	2	4	4	4	4	4	4	4	4
ELM Programs	1	1	1	1	1	1	2	2	2	2
Public Programs	6	6	7	7	8	8	8	8	8	8
Private Programs	3	3	5	5	5	5	5	5	5	5
Total Number of Schools	9	9	11	11	12	12	13	13	13	13

The share of nursing programs that partner with another nursing school that offers a higher degree has fluctuated over the last seven years. In 2011-2012, approximately one-quarter (23.1%, n=3) of Southern Border nursing programs collaborated with another program to offer a higher degree in nursing.

	<i>Academic Year</i>						
	<i>2005-2006</i>	<i>2006-2007</i>	<i>2007-2008</i>	<i>2008-2009</i>	<i>2009-2010</i>	<i>2010-2011</i>	<i>2011-2012</i>
Partnerships*							
Schools that partner with another program that leads to a higher degree	16.7%	0%	7.7%	7.7%	38.5%	23.1%	23.1%
Total number of programs	12	13	13	13	13	13	13

*These data were collected for the first time in 2005-2006.

² 2011-2012 data may be influenced by satellite campus data being reported and allocated to their proper region for the first time in the 2011-2012 survey. Tables affected by this change are noted, and we caution the reader against comparing data collected in 2011-2012 with data collected in previous year's surveys.

Admission Spaces and New Student Enrollments

Pre-license nursing programs in the Southern Border region reported a total of 1,148 spaces available for new students in 2011-2012. These spaces were filled with a total of 1,223 students, which represents the sixth consecutive year that programs in the region have enrolled more students than there were spaces available. 46.2% (n=6) of nursing programs in the region reported filling more admission spaces than were available and the most frequently reported reason for doing so was to account for attrition.

Availability and Utilization of Admission Spaces[†]

	<i>Academic Year</i>									
	<i>2002-2003</i>	<i>2003-2004</i>	<i>2004-2005</i>	<i>2005-2006</i>	<i>2006-2007</i>	<i>2007-2008</i>	<i>2008-2009</i>	<i>2009-2010</i>	<i>2010-2011</i>	<i>2011-2012</i>
Spaces Available	679	707	1,047	1,065	1,173	1,176	1,140	1,212	1,351	1,148
New Student Enrollments	665	709	969	1,000	1,211	1,241	1,276	1,484	1,523	1,223
% Spaces Filled	97.9%	100.3%	92.6%	93.9%	103.2%	105.5%	111.9%	122.4%	112.7%	106.5%

[†]2011-2012 data may be influenced by the allocation of satellite campus data to another region

Southern Border nursing programs continue to receive more applications requesting entrance into their programs than can be accommodated. The increase in qualified applications, combined with the decrease in availability of space, is reflected in the 57.6% of qualified applications that were not accepted for admission in 2011-2012.

Student Admission Applications^{*†}

	<i>Academic Year</i>									
	<i>2002-2003</i>	<i>2003-2004</i>	<i>2004-2005</i>	<i>2005-2006</i>	<i>2006-2007</i>	<i>2007-2008</i>	<i>2008-2009</i>	<i>2009-2010</i>	<i>2010-2011</i>	<i>2011-2012</i>
Qualified Applications	1,177	1,675	1,729	2,862	2,637	2,378	2,802	2,751	2,117	2,887
Accepted	665	709	969	1,000	1,211	1,241	1,276	1,484	1,523	1,223
Not Accepted	512	966	760	1,862	1,426	1,137	1,526	1,267	594	1,664
% Qualified Applications Not Accepted	43.5%	57.7%	44.0%	65.1%	54.1%	47.8%	54.5%	46.1%	28.1%	57.6%

*These data represent applications, not individuals. A change in the number of applications may not represent an equivalent change in the number of individuals applying to nursing school.

[†]2011-2012 data may be influenced by the allocation of satellite campus data to another region

Pre-license nursing programs in the Southern Border region enrolled 1,223 new students in 2011-2012. The distribution of new enrollments by program type was 48.7% ADN (n=596), 42.6% BSN (n=521), and 8.7% ELM (n=106). Just over one-half (51.3%) of pre-license nursing students were enrolled in one of the region's public programs in 2011-2012.

New Student Enrollment by Program Type[†]

	<i>Academic Year</i>									
	<i>2002-2003</i>	<i>2003-2004</i>	<i>2004-2005</i>	<i>2005-2006</i>	<i>2006-2007</i>	<i>2007-2008</i>	<i>2008-2009</i>	<i>2009-2010</i>	<i>2010-2011</i>	<i>2011-2012</i>
New Student Enrollment	665	709	969	1,000	1,211	1,241	1,276	1,484	1,523	1,223
ADN	406	441	619	561	653	648	608	660	624	596
BSN	229	228	311	400	521	550	612	699	757	521
ELM	30	40	39	39	37	43	56	125	142	106
Private	162	169	364	417	451	448	451	661	669	596
Public	503	540	605	583	760	793	825	823	854	627

[†]2011-2012 data may be influenced by the allocation of satellite campus data to another region

Student Census Data

A total of 2,418 students were enrolled in one of Southern Border region's pre-license nursing program as of October 15, 2012. The 2012 census of the region's programs indicates that 43.4% (n=1,049) of students were enrolled in ADN programs, 47.9% (n=1,158) in BSN programs, and 8.7% (n=211) in ELM programs.

Student Census Data^{*†}

<i>Program Type</i>	<i>Year</i>									
	<i>2003</i>	<i>2004</i>	<i>2005</i>	<i>2006</i>	<i>2007</i>	<i>2008</i>	<i>2009</i>	<i>2010</i>	<i>2011</i>	<i>2012</i>
ADN	598	648	964	1,067	1,104	1,208	1,063	1,027	1,021	1,049
BSN	577	629	732	887	1,052	1,062	1,301	1,469	1,084	1,158
ELM	30	39	39	39	43	85	143	206	183	211
Total Nursing Students	1,205	1,316	1,735	1,993	2,199	2,355	2,507	2,702	2,288	2,418

*Census data represent the number of students on October 15th of the given year.

[†]2012 data may be influenced by the allocation of satellite campus data to another region

Student Completions

Program completions at Southern Border pre-license nursing programs totaled 1,093 in 2011-2012. The distribution of completions by program type was 40.4% ADN (n=442), 43.6% BSN (n=477), and 15.9% ELM (n=174).

Student Completions[†]

	<i>Academic Year</i>									
	2002-2003	2003-2004	2004-2005	2005-2006	2006-2007	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012
Student Completions	523	622	693	739	788	864	1,062	1,243	1,125	1,093
ADN	341	415	438	493	503	576	573	549	468	442
BSN	157	178	216	207	250	288	447	641	557	477
ELM	25	29	39	39	35	0	42	53	100	174

[†]2011-2012 data may be influenced by the allocation of satellite campus data to another region

Retention and Attrition Rates

Of the 1,002 students scheduled to complete one of the region's pre-license nursing programs in the 2011-2012 academic year, 79.4% (n=796) completed the program on-time, 8.9% (n=89) are still enrolled, while 11.7% (n=117) dropped out or were disqualified from the program.

Student Retention and Attrition[†]

	<i>Academic Year</i>									
	2002-2003	2003-2004	2004-2005	2005-2006	2006-2007	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012
Students Scheduled to Complete the Program	967	742	782	832	820	839	1,064	951	880	1,002
Completed On Time	537	567	620	689	649	659	812	713	667	796
Still Enrolled	344	109	78	35	64	53	96	102	104	89
Attrition	86	66	84	108	107	127	156	136	109	117
Completed Late [‡]								46	54	39
Retention Rate*	55.5%	76.4%	79.3%	82.8%	79.1%	78.5%	76.3%	75.0%	75.8%	79.4%
Attrition Rate**	8.9%	8.9%	10.7%	13.0%	13.0%	15.1%	14.7%	14.3%	12.4%	11.7%
% Still Enrolled	35.6%	14.7%	10.0%	4.2%	7.8%	6.3%	9.0%	10.7%	11.8%	8.9%

[†]2011-2012 data may be influenced by the allocation of satellite campus data to another region

[‡]Data were collected for the first time in the 2009-2010 survey. These completions are not included in the calculation of either the retention or attrition rates.

*Retention rate = (students completing program on-time)/(students scheduled to complete)

**Attrition rate = (students dropped or disqualified who were scheduled to complete)/(students scheduled to complete)

Note: Blank cells indicate the information was not requested in the given year.

Attrition rates among the region's pre-license nursing programs vary by program type. Average attrition rates are lowest among ELM programs and highest among ADN programs, and are also much lower among private programs (5.1%) compared to public nursing programs (17.6%).

Attrition Rates by Program Type*†

Program Type	Academic Year									
	2002-2003	2003-2004	2004-2005	2005-2006	2006-2007	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012
ADN	16.1%	13.1%	14.6%	16.3%	11.6%	15.3%	18.2%	21.1%	23.5%	18.2%
BSN	2.2%	2.0%	3.5%	6.6%	16.7%	14.9%	11.4%	12.1%	6.0%	7.6%
ELM							3.5%	2.1%	4.1%	2.8%
Private	14.4%	13.8%	6.3%	11.5%	9.6%	15.5%	12.3%	14.9%	9.4%	5.1%
Public	7.8%	7.5%	12.3%	13.7%	15.2%	15.0%	15.9%	14.1%	14.0%	17.6%

*Changes to the survey that occurred between 2003-2004 and 2005-2006 may have affected the comparability of these data over time.

†2011-2012 data may be influenced by the allocation of satellite campus data to another region

Retention and Attrition Rates for Accelerated Programs

The 2011-2012 average retention rate for accelerated programs in the Southern Border region was 92.4%, which is much higher by comparison with traditional programs. Similarly, the average attrition rate was 2.5%, which is considerably lower than the average rate for traditional programs.

Student Retention and Attrition for Accelerated Programs*†

	Academic Year				
	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012
Students Scheduled to Complete the Program	87	122	340	183	157
Completed On Time	53	102	302	167	145
Still Enrolled	8	4	12	6	8
Attrition	26	16	26	10	4
Completed Late‡			18	11	10
Retention Rate**	60.9%	83.6%	88.8%	91.3%	92.4%
Attrition Rate***	29.9%	13.1%	7.6%	5.5%	2.5%
% Still Enrolled	9.2%	3.3%	3.5%	3.3%	5.1%

*Retention and attrition data for accelerated programs were collected for the first time in 2007-2008.

†2011-2012 data may be influenced by the allocation of satellite campus data to another region.

‡Data were collected for the first time in 2009-2010 survey. These completions are not included in the calculation of either the retention or attrition rates.

**Retention rate = (students completing program on-time)/(students scheduled to complete)

***Attrition rate = (students dropped or disqualified who were scheduled to complete)/(students scheduled to complete)

Note: Blank cells indicated that the applicable information was not requested in the given year.

NCLEX Pass Rates

NCLEX pass rates have fluctuated within a narrow range over the past decade for BSN programs. Pass rates for ADN and ELM programs show much greater variation compared to BSN programs. 2011-2012 pass rates were 92.4% for ADN graduates, 89.5% for BSN graduates, and 80.2% for ELM graduates. The 2011-2012 NCLEX pass rate for graduates of the region's accelerated program graduates was 88.3%.

First Time NCLEX Pass Rates*†

Program	Academic Year									
	2002-2003	2003-2004	2004-2005	2005-2006	2006-2007	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012
ADN	83.8%	85.8%	79.8%	84.1%	87.0%	80.4%	84.5%	88.6%	84.3%	92.4%
BSN	92.0%	91.8%	91.8%	88.5%	93.0%	88.6%	90.9%	86.1%	87.4%	89.5%
ELM	100.0%	84.2%	93.9%	93.6%	94.9%		92.3%	62.5%	82.9%	80.2%
Accelerated Programs**						82.5%	86.3%	89.3%	80.7%	88.3%

*NCLEX pass rates for students who took the exam for the first time in the past five years.

†2011-2012 data may be influenced by the allocation of satellite campus data to another region

**These data were collected for the first time in 2007-2008.

Employment of Recent Nursing Program Graduates³

Hospitals represent the most frequently reported employment setting for recent graduates of pre-license programs in the Southern Border region. In 2011-2012, the region's programs reported that 63.1% of employed recent graduates were working in a hospital setting. Programs also reported that 22.5% of recent graduates had not found employment in nursing at the time of the survey. The 2011-2012 average regional share of new graduates employed in nursing in California was 73.0%.

Employment of Recent Nursing Program Graduates[†]

Employment Location	Academic Year							
	2004-2005	2005-2006	2006-2007	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012
Hospital	81.5%	69.8%	78.5%	93.2%	83.3%	55.6%	56.6%	63.1%
Long-term care facilities	1.0%	0.9%	1.7%	2.0%	6.9%	5.0%	4.3%	5.2%
Community/public health facilities	0.7%	1.3%	1.6%	2.4%	6.1%	7.3%	3.8%	2.2%
Other healthcare facilities	1.0%	0.6%	1.8%	2.2%	6.4%	5.6%	4.7%	4.3%
Other	5.3%	27.4%	3.2%	0.2%	9.2%	11.4%	3.9%	2.6%
Unable to find employment*						30.7%	20.3%	22.5%
In California	81.5%	69.5%	79.4%	95.2%	93.5%	77.1%	72.6%	73.0%

†2011-2012 data may be influenced by the allocation of satellite campus data to another region

*Data were added to the survey in 2009-2010

Note: Blank cells indicate the information was not requested in the given year

³ Graduates whose employment setting was reported as "unknown" have been excluded from this table. In 2011-2012, on average, the employment setting was unknown for 13% of recent graduates.

Clinical Simulation in Nursing Education

Between 8/1/11 and 7/31/12, all 13 nursing schools in the Southern Border reported using clinical simulation⁴, and 76.9% (n=10) reported plans to expand the center. The most frequently reported reasons for why schools in the region used clinical simulation were to make up for clinical experiences and to provide clinical experience not available in a clinical setting.

Reasons for Using a Clinical Simulation Center*	2007-08	2008-09	2009-10	2010-11	2011-12
To provide clinical experience not available in a clinical setting	62.5%	66.7%	100%	100%	84.6%
To standardize clinical experiences	87.5%	75.0%	72.7%	91.7%	76.9%
To check clinical competencies	87.5%	83.3%	81.8%	91.7%	76.9%
To make up for clinical experiences	62.5%	66.7%	72.7%	75.0%	92.3%
To increase capacity in your nursing program	37.5%	16.7%	27.3%	16.7%	30.8%
Number of schools that use a clinical simulation center	8	12	11	12	13

*These data were collected for the first time in 2006-2007. However, changes in these questions for the 2007-2008 administration of the survey and lack of confidence in the reliability of the 2006-2007 data prevent comparability of the data. Therefore, data prior to 2007-2008 are not shown.

Clinical Space & Clinical Practice Restrictions⁵

The number of Southern Border nursing programs that reported that they were denied access to a clinical placement, unit or shift increased from 11 to 12 programs in 2011-2012. The majority of Southern Border RN programs reported being denied access to clinical placements (76.9%, n=10), a clinical unit (84.6%, n=11), or a clinical shift (69.2%, n=9) in 2011-2012. Access to an alternative clinical site depended on the type of space denied. Only 45.5% of programs denied clinical units were offered an alternative, compared to 60% of programs denied a clinical placement, and 77.8% of programs denied a clinical shift. The lack of access to clinical space resulted in a loss of 142 clinical placements, 31 units and 14 shifts, which affected 124 students.⁶

Denied Clinical Space	2010-11	2011-12
Programs Denied Clinical Placement	11	10
Programs Offered Alternative by Site	3	6
Placements Lost	46	142
Number of programs that reported	13	12
Programs Denied Clinical Unit	8	11
Programs Offered Alternative by Site	4	5
Units Lost	22	31
Number of programs that reported	13	12
Programs Denied Clinical Shift	5	9
Programs Offered Alternative by Site	3	7
Shifts Lost	12	14
Number of programs that reported	13	12
Total number of students affected	258	124

⁴ Clinical simulation provides a simulated real-time nursing care experience using clinical scenarios and low to hi-fidelity mannequins, which allow students to integrate, apply, and refine specific skills and abilities that are based on theoretical concepts and scientific knowledge. It may include videotaping, de-briefing and dialogue as part of the learning process.

⁵ Some of these data were collected for the first time in 2009-2010. However, changes in these questions for the 2010-2011 administration of the survey prevent comparability of the data. Therefore, data prior to 2010-2011 is not shown.

⁶ Only 7 of the 12 programs that reported experiencing a loss of clinical placements, units, or shifts also reported the total number of students affected by the loss.

The most frequently reported reasons for why schools were denied clinical space in 2011-2012 were competition for space arising from an increase in the number of nursing students, and being displaced by another program. In 2011-2012 schools more frequently reported being denied space due to staff nurse overload or insufficient qualified staff, and because of nurse residency programs compared with previous years.

Reasons for Clinical Space Being Unavailable*	2009-10	2010-11	2011-12
Competition for clinical space due to increase in number of nursing students in region	80.0%	72.7%	75.0%
Displaced by another program	90.0%	45.5%	75.0%
Staff nurse overload or insufficient qualified staff	50.0%	27.3%	66.7%
Closure, or partial closure, of clinical facility		27.3%	25.0%
Clinical facility seeking magnet status	30.0%	18.2%	25.0%
No longer accepting ADN students	40.0%	18.2%	41.7%
Change in facility ownership/management		18.2%	0%
Nurse residency programs	10.0%	9.1%	33.3%
Decrease in patient census	40.0%	0%	0%
Other	10.0%	9.1%	0%
Number of programs that reported	10	11	12

*Data were collected for the first time in the 2009-2010 or 2010-2011 survey.

Note: Blank cells indicate that the applicable information was not requested in the given year.

Reasons for lack of access to clinical space vary by program. In 2011-2012, all types of programs cited an increase in nursing students in the region as one of the predominant reasons for unavailable clinical space. BSN and ELM programs also reported staff nurse overload as a major reason for lack of access, while ADN programs reported displacement by another program and clinical sites no longer accepting ADN students.

Reasons for Clinical Space Being Unavailable, by Program Type, 2011-2012

Reasons for Clinical Space Being Unavailable	Program Type			
	ADN	BSN	ELM	Total
Competition for clinical space due to increase in number of nursing students in region	71.4%	75.0%	100%	75.0%
Displaced by another program	85.7%	50.0%	100%	75.0%
Staff nurse overload or insufficient qualified staff	42.9%	100%	100%	66.7%
Closure, or partial closure, of clinical facility	0%	75.0%	0%	25.0%
Clinical facility seeking magnet status	42.9%	0%	0%	25.0%
No longer accepting ADN students	71.4%	0%	0%	41.7%
Change in facility ownership/management	0%	0%	0%	0%
Nurse residency programs	28.6%	25.0%	100%	33.3%
Decrease in patient census	0%	0%	0%	0%
Implementation of Electronic Health Records system	0%	0%	0%	0%
Other	0%	0%	0%	0%
Number of programs that reported	7	4	1	12

Programs that lost access to clinical space were asked to report on the strategies used to cover the lost placements, sites, or shifts. The most frequently reported strategies (66.7%) were to replace the lost clinical space at the same site, or at a different site currently being used by the program. Over one-half of the programs reported being able to replace lost space by adding a new clinical site (58.3%).

Strategies to Address the Loss of Clinical Space, 2011-2012*

Strategy to Address Lost Clinical Space	2011-12
Replaced lost space at different site currently used by nursing program	66.7%
Replaced lost space at same clinical site	66.7%
Added/replaced lost space with new site	58.3%
Clinical simulation	33.3%
Reduced student admissions	8.3%
Other	8.3%
Number of programs that reported	12

*Data were collected for the first time during the 2011-2012 survey.

61.5% (n=8) of nursing programs in the Southern Border reported an increase in out-of-hospital clinical placements in 2011-2012, with home health agencies and outpatient mental health and substance abuse services reported as the most frequently used alternative clinical placement sites overall. These settings were more frequently reported in 2011-2012 compared with one year ago. In contrast, placements in skilled nursing/rehabilitation facilities were less frequently reported in 2011-2012.

Alternative Clinical Sites*	2010-11	2011-12
Skilled nursing/rehabilitation facility	70%	50.0%
Outpatient mental health/substance abuse	50%	62.5%
Home health agency/home health service	40%	75.0%
Hospice	40%	37.5%
Public health or community health agency	40%	50.0%
Medical practice, clinic, physician office	30%	25.0%
School health service (K-12 or college)	30%	25.0%
Case management/disease management	10%	25.0%
Correctional facility, prison or jail	10%	25.0%
Urgent care, not hospital-based	10%	12.5%
Occupational health or employee health service	0%	0%
Renal dialysis unit	0%	0%
Surgery center/ambulatory care center	0%	12.5%
Number of programs that reported	10	8

*Data collected for the first time in 2010-2011

Note: Blank cells indicate that the applicable information was not requested in the given year.

In 2011-2012, 76.9% (n=10) of Southern Border schools reported that pre-licensure students in their programs had encountered restrictions to clinical practice imposed on them by clinical facilities. The most common types of restricted access students faced were to the clinical site itself, due to a visit from the Joint Commission or another accrediting agency, access to electronic medical records, and access to some patients due to the staff workload. Schools reported that it was uncommon to have students face restrictions with glucometers, IV medication administration, and to automated medical supply cabinets.

Common Types of Restricted Access for RN Students	2009-10	2010-11	2011-12
Clinical site due to visit from accrediting agency (Joint Commission)	56.7%	80.0%	80.0%
Electronic Medical Records	33.3%	40.0%	60.0%
Bar coding medication administration	22.2%	30.0%	50.0%
Automated medical supply cabinets	11.1%	20.0%	20.0%
Direct communication with health team	0%	20.0%	30.0%
Some patients due to staff workload		20.0%	60.0%
Glucometers	11.1%	10.0%	20.0%
IV medication administration	0%	10.0%	10.0%
Alternative setting due to liability	11.1%	10.0%	40.0%
Student health and safety requirements		10.0%	30.0%
Number of schools that reported	9	10	10

Note: Blank cells indicated that the applicable information was not requested in the given year.

Faculty Census Data⁷

On October 15, 2012, there were 454 total nursing faculty⁸ in the Southern Border, 30.6% (n=139) of whom were full-time and 69.4% (n=315) were part-time. In addition, there were 21 vacant faculty positions in the region, which represents a 4.4% faculty vacancy rate..

Faculty Census Data[†]

	<i>Year</i>									
	2003	2004	2005*	2006*	2007*	2008	2009	2010	2011	2012
Total Faculty	195	201	283	292	349	402	445	482	492	454
Full-time	95	93	104	95	124	134	136	143	148	139
Part-time	100	108	150	195	225	268	309	339	344	315
Vacancy Rate**	10.6%	5.2%	5.7%	4.6%	5.7%	3.4%	2.2%	2.2%	3.9%	4.4%
Vacancies	23	11	17	14	21	14	10	11	20	21

[†]2012 data may be influenced by the allocation of satellite campus data to another region

*The sum of full- and part-time faculty did not equal the total faculty reported in these years.

**Vacancy rate = number of vacancies/(total faculty + number of vacancies)

In 2011-2012, the majority of Southern Border nursing schools (61.5%, n=8) reported that their faculty work an overloaded schedule. All eight schools reported that the faculty are paid extra for the overloaded schedule.

Overloaded Schedules for Faculty*	<i>Academic Year</i>			
	2008-09	2009-10	2010-11	2011-12
Schools with overloaded faculty	9	8	8	8
Share of schools that pay faculty extra for the overload	88.9%	100%	100%	100%
Total number of schools	13	13	13	13

*Data were collected for the first time in 2008-2009

⁷ Census data represent the number of faculty on October 15th of the given year.

⁸ Since faculty may work at more than one school, the number of faculty reported may be greater than the actual number of individuals who serve as faculty in California nursing schools.

Summary

Over the past decade, the number of Southern Border pre-licensure nursing programs has grown by 44.4%, from nine programs in 2002-2003 to 13 programs in 2011-2012. The share of programs partnering with another program to offer a higher degree than offered at their own school has fluctuated over time, with 23.1% of programs reporting such a collaboration in 2011-2012.

Pre-license nursing programs in the region reported a total of 1,148 spaces available for new students in 2011-2012, which were filled with a total of 1,223 students. This represents the sixth consecutive year pre-licensure nursing programs in the Southern Border enrolled more students than were spaces available. Qualified applications to the region's programs in 2011-2012 totaled 2,887, 57.6% of which were not accepted for admission.

In 2011-2012, Southern Border nursing programs reported 1,093 completions, double the number of completions reported ten years ago. However, if the current retention rate of 79.4% remains consistent, and if new student enrollments decline from their current level, the annual number of graduates from the region's pre-license nursing programs is likely to decline in future years. At the time of the survey, 22.5% of recent graduates from the region's programs were unable to find employment in nursing.

Clinical simulation has become widespread in nursing education. It is seen by schools as a way to standardize and make up for clinical experiences and to provide clinical experiences that are otherwise unavailable to students. The importance of clinical simulation is underscored by data showing an increase in out-of-hospital clinical placements and an increasing share of programs report being denied access to clinical placement sites that were previously available to them. In addition, 76.9% (n=10) of Southern Border nursing schools reported that their students had faced restrictions to specific types of clinical practice during the 2011-2012 academic year.

Expansion in RN education has required nursing programs to hire more faculty to teach the growing number of students. Although the number of nursing faculty has more than doubled in the past ten years, faculty hires have not kept pace with growth in Southern Border pre-licensure nursing programs. In 2011-2012, 21 faculty vacancies were reported, representing a faculty vacancy rate of 4.4%, which is the highest rate reported in the past five years.

APPENDIX A – Southern Border Nursing Education Programs

ADN Programs (7)

Grossmont College
 Imperial Valley College
 Kaplan College (*formerly Maric College*)
 Mira Costa College
 Palomar College
 San Diego City College
 Southwestern College

BSN Programs (4)

CSU San Marcos
 National University
 Point Loma Nazarene University
 San Diego State University

ELM Programs (2)

United States University (*formerly InterAmerican College*)
 University of San Diego

Satellite Campus (1)

Azusa Pacific University - ELM

APPENDIX B – BRN Education Issues Workgroup

BRN Education Issues Workgroup Members

Members

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Organization

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 Samuel Merritt University
 Sonoma State University
 Community College Chancellor's Office
 College of the Redwoods
 Loma Linda University
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 Kaiser Foundation Health Plan
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